communities about Drug abuse and spread of HIV and AIDS;

— To strengthen Blood Safety Programme by strengthening the existing blood bank and linking with existing Zonal Blood Testing Centres;

— To strengthen S,T,D. Control programme to prevent spread of HJV through Sexcal Contract;

— To strengthen the Drug De-addiction Programme and establish rehabilita tion centres in coordinatiin with the Welfare Minstry and NGOs working in the field.

(c) HIV testing centres have been established in Medical Colleges, Guwahati, Medical College Silchar and Regional Medical College, Imphal.

Performance of duties of registration work

3840. SHRIMATI RENUKA CHOWDHARY; Will the Minister of HEALTH AND FAMILY WELFARE *be phased* to state:

(a) whether Government are aware that in the various C.G.H.S. units of Indian System of Medicine and Homoeo pathy in Delhi/New Delhi, the duty of registration work and distribution of medicines is performed by Group 'D' employees due to the non-posting of Pharmacists or Store-keepers there;

(b) if so, what effective steps Government propose to take to fill up the vacancies of Pharmacists and Store-Keepers in the Units of Indian System of Medicine and Homoeopathy in Delhi/ New Delhi;

(c) whether any proposal for augmentation of staff in- Indian System of Medicine and Homoeopathy units are under active consideration of Government; and

(d) if so, what are the details thereof; and

(e) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT. D. K. THARA DEVI SIDDHARTHA): (a) and (b) No, Sir. All the sanctioned posts of Pharmacists under Homoeopathic/Unani system of medicines are already filled up, However, three posts of Ayurvedic Pharmacists are lying vacant due to non-availability of suitable candidates possessing requisite qualification, despite efforts made to fill the posts.

(c) At present there is no such proposal.

(d) and (e) Question does not arise.

उत्तर प्रदेश में परिवार नियोजन केन्द्र

3841. **श्री ईश दत्त यादव :** क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) इस समय उत्तर प्रदेश में कितने-परिवार नियोजन केन्द्र है और सरकार प्रति-प्रतिवर्ष उन पर जिलावार कितनी-कितनी धनराशि खर्च करती है ; और

(ख) 1990-91 और 1991–92 के वर्ष के दौरान प्रत्यक जिले में कितने-कितने व्यक्तियों का ऑपरेशन किया गया है ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्रीमती डा० के० के० तारा देवी सिद्धार्थ): (क) और (ख) राज्य सरकार से सूचना एकत्र की जा रही है और सदन के पटल पर रख दी जाएगी ।

Human Resource Development in the country

3842. SHRIMATI CHANDRIKA ABHINANDAN JAIN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) Whether Government's attention (has been drawn to the news-item which appeared in the Economic Times of 30th June, 1992 under the captions 'Kerala among best in HRD; North Worst; U.N. Report';

(b) if so, the reaction of Government thereto; and

(c) -whether Government agree with conclusions as given in the latest report on the State of World population quoted in the news-item referred to in part (a) above?

; THE MINISTER OF STATE IN THE MINISTRY OF HEALTH! AND FAMILY WELFARE (SMT. D. K. THARA DEVI SIDDHARTHA): (a) to (c) The Government are aware that the excellent results achieved by the Kerala State in respect of many parameters of Human Resource Development have created conditions for speedy fertility decline as indicated in UNFPA's "The State of World Population 1992'.. On the other hand, the low levels of achievement in respect of similar parameters in the States of Bihar, Madhya Pradesh, Orissa, Rajasthan and Uttar Pradesh have created conditions in which the fertility levels continue to remain high. This is clearly brought out in the comparative statement enclosed as Annexe-I *(See* Appendix CLXIV, Annexure No. 59).

The need for improving parameters such as female literacy, age at marriage of females, socio-economic status of women and bringing down the infant mortality rate with a view to creating conditions for speedy fertility decline is already well recognised. Accordingly, a Committee of the National Development Council has been constituted to evolve a National Population Policy and recommend appropriate strategic interventions based on a holistic and mullti-sectoral apprpach to the population control efforts in the country. The Eighth Five Year Plan also highlights the need for taking action to improve the socio-economic determinants of fertility such as female literacy age of marriage, employment opportunities for women and their status in the society.

AIDS in Manipur

3843. SHRIMATI SARALA MAHESHWARl: Will the Minister of HEALTH! AND FAMILY WELFARE be pleased[1] to state:

(a) whether it is a fact that Manipur is one of the most severely AIDS affect ed areas;

(b) whether Voluntary Health Association and the ICMR have conducted separate surveys in Manipur to find out the exact incidence of AIDS, if so, the details of the findings;

(c) what are the major recommendations of these studies; and

(d) whether it is a fact that' no special allocation were made to deal with this increasing problem; if so, what are the reasons therefor and the steps taken or proposed to be taken to deal with the situation?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SMT. D. K. THARA DEVI SIDDHARTHA): (a) Yes, Madam.

(b) and (c) The Voluntary Health Association and ICMR have not conducted any separate surveys in Manipur to find out the exact incidence of AIDS. However, National Institute of Cholera and Enteric diseases Calcutta, under ICMR, nave established an ICMR HIV surveillance centre to study indepth the problem of drug addiction, HIV infection and AIDS in Manipur Major high risk group found in Manipur are intravenous drug users, prostitutes and traders. Seropositivity was highest among IVDU's (50—70 per cent) and comparatively lower in prostitutes (3 per cent) and antenatal expectants (1—5 per cent).

(d) Adequate amount of assistance in cash and kind (Rs. 35.00 lakhs during 1991-92) were released to the state of Manipur to deal with the problem of AIDS. Under the World Bank aided National AIDS Control programme it is proposed to take up programmes to create awareness among masses regarding drug abuse, to ensure the safety of blood and blood products and to control Sexually Transmitted Disease's (STD) in a phased manner.

Visit of Lt. Government to Vasant Kunj

3844. SHRI B. K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the Lt. Governor of Delhi visited Vasant Kunj